

Spit Tobacco: Know the Score

CHEW AND SNUFF

There are two forms of spit tobacco (also called smokeless tobacco).

Chew is a leafy, bulky tobacco sold in pouches. “Chewing tobacco,” as its name suggests, is chewed.

Snuff is a finely ground tobacco sold in small tins.

Users hold a pinch of “dip” or “rub” between their cheek and gum.

A message from the
National Institute of Dental
and Craniofacial Research and
National Cancer Institute,
National Institutes of Health

SPIT TOBACCO IS NOT A SAFE ALTERNATIVE TO CIGARETTES

Like cigarettes, spit tobacco is addictive and can be harmful to your health.

Spit tobacco contains at least 28 known cancer-causing chemicals and the addictive drug nicotine. The **chemicals** can lead to cancer of the mouth and throat. **Nicotine** can get you hooked on spit tobacco. If you hold an average-size dip in your mouth for 30 minutes, you get as much nicotine as you would from smoking 2 to 3 cigarettes.

Spit tobacco can cause gum recession, mouth sores, and oral cancer.

Gum recession—when gums pull away from the teeth—is not only unsightly, but can make you vulnerable to decay on tooth roots and make your teeth sensitive. Gum recession is usually permanent and is difficult to repair.

Sores, white patches, and lumps inside the mouth are signs of tissue damage caused by using spit tobacco. Some white patches can turn into cancer over time.

Spit tobacco users are more likely than nonusers to get oral cancer—cancer of the mouth and throat.

Oral cancer includes cancers of the lip, tongue, cheek, throat, gums, roof and floor of the mouth, and larynx (voice box). Surgery to treat oral cancer is often extensive and disfiguring and may involve removing parts of the face, tongue, cheek, or lip. Difficulty chewing, swallowing, talking, and even breathing can result from cancer and the surgery required to treat it. Oral cancer can spread to other parts of the body quickly. On average, half of oral cancer victims are dead within 5 years of diagnosis.

Besides ruining your health, spit tobacco can ruin your image: stained teeth, tobacco stuck between teeth, bad breath, and behaviors such as constant spitting and drooling are a turnoff to many people.

If you're not already a user, stay tobacco-free. Don't experiment.

Spit tobacco is highly addictive; it's easy to get hooked.

QUITTING SPIT

If you do use spit tobacco and have decided to quit, you need a plan. Quitting on the spur of the moment without a plan is harder. The following section will give you tips on how to quit dipping or chewing. Spit tobacco is a tough opponent— but it is possible to quit.

For more information on how to quit spit, call:

1-800-4-CANCER



This fact sheet is available from

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Preparing to Quit.

List the reasons you want to quit. These could include:

- You don't want cancer.
- You don't like bad breath and stained teeth.
- You don't want nicotine to control you.

Make a Step-by-Step Plan for Quitting.

Quitting is easier when you're prepared.

- Ask for encouragement from family and friends.
- Ask another spit tobacco user to quit with you.
- Call organizations such as the American Cancer Society for support groups in your area.
- Talk to your dentist or physician about nicotine gum or patches.
- Pick a Quit Date and taper down until you reach it.
- Cut back or switch from the highest nicotine brands.
- Find alternatives to spit tobacco. Sugarless gum or sunflower seeds make good substitutes.

On Quit Day . . .

- Change your daily routine and stay busy.
- Make an appointment to get your teeth cleaned.

Dealing with Cravings for Spit Tobacco.

- Urges to use last only a few minutes. Try waiting them out.
- Do some deep breathing.
- Exercise.
- Call a friend.
- Reach for gum, sunflower seeds, or snacks.

Stick to it. Don't give up.

- Quitting takes practice. Chances of success increase with each try.
- If you slip, pick up right where you left off.

This publication is also available online through the NOHIC home page at **www.nohic.nidcr.nih.gov**